

**Notary Public Notification of
Change of Name and Request to Correct Record**

Please complete this form in its entirety. Print Legibly.

Previous name _____
(as notary public commission issued)

Date commission issued _____

Date of name change _____

Changed by - check one- () court order or () marriage

New name _____
(as appears on new notary seal and to correct record)

Present mailing address _____
(street, route and/or box number)

(city, state and zip code)

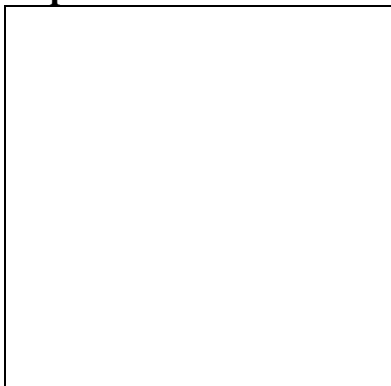
(county)

I hereby submit this notification of change of name and request that all records in the Office of the Secretary of State pertaining to my appointment and commission as notary public be corrected.

(Signature)

(Date)

Imprint of new seal here



**Return to: Chris Nelson
Secretary of State
500 E. Capitol
Pierre, SD 57501-5077
(605)773-3539**